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CONFIRMATION NO. 7452

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|---|---|-----------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/820,299 | FILING OR 371(c) DATE 04/09/2004 RULE | CLASS 280 | GROUP ART UNIT 3616 | ATTORNEY DOCKET NO. 81094717 (202-0564) | |
| APPLICANTS Tor Vopn Eichwald, Goteborg, SWEDEN; | | | | | |
| ** CONTINUING DATA ***** NONE DD | | | | | |
| ** FOREIGN APPLICATIONS ***** EUROPEAN PATENT OFFICE (EPO) 03008559.1 04/14/2003 DD | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/19/2004 | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> | | STATE OR COUNTRY SWEDEN | SHEETS DRAWING 4 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 1 |
| ADDRESS 022844 | | | | | |
| TITLE Seat belt device | | | | | |
| FILING FEE RECEIVED 900 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |